2765-05

REQUEST FOR SELF-EMPLOYMENT INFORMATION

1.	Name shown on your Social Security card (Please Print Use Black Ink or #2 Pencil)
	First M.I. Last
2.	Social Security number on your card:
3.	Were the earnings shown on the front of this letter reported on your (joint/individual) tax return?
	If No, explain
	ii No, explair
	If Yes, do the earnings reported belong to: You Your spouse (Please check one)
	Spouse's Name:
	Spouse's SSN:
4.	Have you ever used another name? No Yes (Give other names used)
	First M.I. Last
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	First M.I. Last
5.	Daytime phone number where you can be reached

If you have any questions, you may call us toll-free at 1-800-772-1213. We can answer most questions over the phone. You can also write or visit any Social Security office. If you do call or visit an office, please have this letter with you. The office that serves your area is located at:

Carolyn L. Simmons Associate Commissioner for Central Operations

Enclosure: Envelope

See Next Page